National PTA Reflections Program
STUDENT ENTRY FORM
2014-2015 - The World Would Be A Better Place If...

☐ Male
☐ Female

Age: __________
Grade: __________
Teacher: __________
Track: __________

Check One Only
National PTA Arts Categories
☐ Dance Choreography
☐ Film Production
☐ Literature
☐ Music Composition
☐ Photography
☐ Visual Arts

Utah PTA Category
☐ 3-Dimensional Art

Check One Only
Grade Divisions
☐ Primary (Preschool - Grade 2) - RED
☐ Intermediate (Grades 3 - 5) - YELLOW
☐ Middle School (Grades 6 - 8) - GREEN
☐ High School (Grades 9 - 12) - BLUE
☐ Special Artist (All Grades) - ORANGE

See Special Artist Rules for more information on this category.
(Reflections Chair: Fill Color Dot above with corresponding color)

PLEASE WRITE LEGIBLY

Student First Name: ___________________________ Student Last Name: ___________________________

Parent/Guardian Name: ___________________________

Parent/Guardian Address: ___________________________
Street Address __________ City __________ State __________ Zip __________

Parent/Guardian Email: ___________________________

Parent/Guardian Phone: ___________________________

I grant to PTA an irrevocable, unlimited license to display, copy, sublicense, publish, and create and sell derivative works from my work submitted for the Reflections Program. PTA is not responsible for lost or damaged works. Entries may not be returned. I understand that I must participate in the Reflections Program through a PTA/PTSA in good standing. I affirm that this is my own original work. I understand that the submission of my entry into the Reflections Program constitutes acceptance of the above conditions.

Full Signature of Student ______________________________________________________________________
Signature of Parent/Legal Guardian (Required if student is under 18 years) ______________________________________________________________________

LOCAL PTA INFO
Check one: ☐ PTA ☐ PTSA
Local Chair Name: Joan Stone
PTA/PTSA Name: Spring Lake PTA
School Address: 1750 S, 500 W, Payson UT 84651
E-Mail: jostone29@hotmail.com
Phone: 801-465-3708

8-Digit PTA ID: 0 0 2 1 8 1 2 7
(Date Bylaws Expire: 9/16)

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Appendix C